

American Consulate General United States of America

3 Regent Terrace Edinburgh, Scotland EH7 5BW

INFORMATION FORM

FOR PREPARATION OF CONSULAR REPORT OF DEATH ABROAD

When an American citizen dies abroad, the Consulate General is required to prepare a Consular Report of Death Abroad to send to the Department of State in Washington. The report is based on the British Death Certificate and is an official document acceptable in any U.S. jurisdiction for the settlement of legal, financial, and estate matters. It is also proof of U.S. citizenship at the time of death. A copy of the Report of Death will be filed with the Social Security and Veteran's Administrations in the U.S. Embassy London Federal Benefits Unit, and a copy will be sent to the state of birth (if applicable).

To assist with the preparation of this document, please provide the following information and return the form to the above address, with an original death certificate and the deceased's U.S. passport or Naturalization Certificate. If the deceased had neither of these, please provide other proof of American Citizenship. Please print clearly. The original documents you enclose will be returned to you.

Personal Data of the Deceased

| Full Name: |
|------------------------------|
| Other Names Used: |
| U.S. Social Security Number: |
| Date and Place of Birth: |
| Date of Death: |
| Place of Death: |
| Most Recent U.S. Address: |
| Most Recent UK Address: |
| Next of Kin Name: |
| Relationship to Deceased: |
| Address of Next of Kin: |
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| Funeral Arrangements |
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| Mortuary Representative Name: |
| Mortuary Name: |
| Disposition of Remains: Burial Cremation |
| Name and Address of Cemetery or Crematorium: |
| Date of Burial or Cremation: |
| Location of Grave or Ashes: |
| Personal Effects |
| Location of Personal Effects: |
| Person or Official Responsible for Custody and Accounting of Effects: |
| Address and Telephone Number: |
| |
| The above information is true and correct to the best of my knowledge and belief. |
| Signature: |
| Printed Name: |
| Relationship to Deceased: |
| Address: |
| Telephone Number: |
| Date: |